Case 16-24779 Doc 1 Filed 08/02/16 Entered 08/02/16 11:03:50 Desc Main Document Page 1 of 64 United States Bankruptcy Court Northern District of Illinois, Eastern Division

IN RE:		Case No
Smith, Katie		Chapter 7
	Debtor(s)	•
	VERIFICATION OF CREE	DITOR MATRIX
		Number of Creditors 34
The above-named Debtor(s) h	ereby verifies that the list of creditors	is true and correct to the best of my (our) knowledge.
Date: August 2, 2016	/s/ Katie Smith Debtor	
	Joint Debtor	

Alcoa Billing Center Midwest Emergency Associates, LLC PO Box 740023 Cincinnati, OH 45274-0023

ARS ARS PO Box 630806 Cincinnati, OH 45263-0806

Ars 1801 NW 66th Ave Fort Lauderdale, FL 33313-4571

Chase Auto Finance National Bankruptcy Dept 201 N Central Ave MSC AZ1-1191 Phoenix, AZ 85004

Chase Bank USA, NA PO Box 15298 Wilmington, DE 19850-5298

City fo Chicago EMS City of Chicago EMS 33589 Treasury Ctr Chicago, IL 60694-3500 Computer Cerdit, INC St. Alexius Medical Center 22589 Network Pl Chicago, IL 60673-1225

Convergent Outsourcing 800 SW 39th St Renton, WA 98057-4975

Creditors Discount & A 415 E Main St Streator, IL 61364-2927

Creditors Discount & Audit.com Creditors Discount & Audit Co. 415 E Main St Streator, IL 61364-2927

Illinois Collection Service Illinois Collection Service INC PO Box 1010 Tinley Park, IL 60477-9110

Illinois Department Employment Security PO Box 19509 Springfield, IL 62794-9509

Jpmorgan Chase Bank PO Box 901003 Fort Worth, TX 76101-2003 Kohls/Capital One PO Box 3115 Milwaukee, WI 53201-3115

Kohls/Capital One PO Box 3120 Milwaukee, WI 53201-3120

Medical Recovery Specialists Medical Recovery Specialists, LLC 2250 E Devon Ave Ste 352 Des Plaines, IL 60018-4521

Midland Funding 2365 Northside Dr Ste 30 San Diego, CA 92108-2709

MiraMed Revenue Group
MiraMed Revenue Group Dept 77304
PO Box 77000
Detroit, MI 48277-2000

Miramedrg 991 Oak Creek Dr Lombard, IL 60148-6408

NorthShore University HealthSystem Billing Department 23056 Network Pl Chicago, IL 60673-1230 Norwood Park Fire Prot Dist Norwood Park Fire Prot Dist 7447 W Lawrence Ave Harwood Heights, IL 60706-3411

Peoples Engy 200 E Randolph St Chicago, IL 60601-6436

Peoples Gas 200 E Randolph St Fl 20 Chicago, IL 60601-6431

Portfolio Recovery Ass 120 Corporate Blvd Ste 1 Norfolk, VA 23502-4962

Presence Resurrection Med CTR Grant & Weber, Inc 861 Coronado Center Dr Ste 211 Henderson, NV 89052-3992

Syncb/Care Credit C/o PO Box 965036 Orlando, FL 32896-5036

Syncb/jc Penneys PO Box 965007 Orlando, FL 32896-5007 Syncb/Old Navy PO Box 965005 Orlando, FL 32896-5005

Synchrony Bank/ Jc Penneys PO Box 965064 Orlando, FL 32896-5064

Synchrony Bank/ Old Navy PO Box 965064 Orlando, FL 32896-5064

Synchrony Bank/Care Credit PO Box 965064 Orlando, FL 32896-5064

Td Bank USA/Targetcred PO Box 673 Minneapolis, MN 55440-0673

Tnb-Visa (TV) / Target C/O Financial & Retail Services Mailstop PO Box 9475 Minneapolis, MN 55440-9475

Unique National Collec 119 E Maple St Jeffersonville, IN 47130-3439 $_{B201B\ (Form\ 201B)}$ Case 16-24779

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Desc Main

Document Page 7 of 64 United States Bankruptcy Court

Northern District of Illinois, Eastern Division

IN RE:	Case No.
Smith, Katie	Chapter 7
De	otor(s)
CERTIFICA	ATION OF NOTICE TO CONSUMER DEBTOR(S)
LIND	ED 8 242(b) OF THE BANKDIIDTCV CODE

		CO D L
Certificate of [Nor	-Attorney] Bankruptcy Petitio	n Preparer
I, the [non-attorney] bankruptcy petition preparer sign notice, as required by § 342(b) of the Bankruptcy Cod		tify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Address:	Preparer	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
v		(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, partner whose Social Security number is provided abo		
	Certificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received	and read the attached notice, as requ	uired by § 342(b) of the Bankruptcy Code.
Smith, Katie	X /s/ Katie Smith	8/02/2016
Printed Name(s) of Debtor(s)	Signature of Debte	or Date

Smith, Katie	X /s/ Katie Smith	8/02/2016
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

About	Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
ame		
ment-issued First n		First name
	e name	Middle name
oicture n to your meeting Last notes.	ame and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
ll Security federal xxx-> Taxpayer	xx-0526	
	ame that is on ment-issued tification (for pur driver's passport). Middle picture on to your meeting tast not stee. Smith Last not passed the picture of	ame that is on ment-issued afficiation (for pur driver's passport). Middle name Smith In to your meeting stee. Ames you have a last 8 years ar married or mes. Matie First name First name First name Smith Last name and Suffix (Sr., Jr., II, III) Ames you have a last 8 years ar married or mes. Matie First name First name Ameticiation (for pur driver's passport). Middle name Smith Last name and Suffix (Sr., Jr., II, III) Ames you have a last 8 years Ar married or mes. Matie First name First name First name Ameticiation (for pur driver's passport). Middle name Smith Last name and Suffix (Sr., Jr., II, III) Ameticiation (for pur driver's passport). Ameticiation (for pur driver's passport). Middle name Smith Last name and Suffix (Sr., Jr., II, III) Ameticiation (for pur driver's passport). Ameticiatio

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Debtor 1 Smith, Katie Document Page 9 of 64 Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
 .	Where you live		If Debtor 2 lives at a different address:
		1321 W Estes Ave # 29 Chicago, IL 60626-5409 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Debtor 1 Smith, Katie

Par	t 2: Tell the Court About	our Ba	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are choosing to file under				ch, see <i>Notice Required by 11</i> check the appropriate box.	U.S.C. § 342(b) for Individuals Filing for Bankruptcy	(Form	
	choosing to file under	■ Chapter 7 □ Chapter 11						
		☐ Chapter 12						
		□ CI	hapter 13					
8.	How you will pay the fee	•	about how yo	ou may pay. Typically, ey is submitting your p	if you are paying the fee yours	with the clerk's office in your local court for more deta self, you may pay with cash, cashier's check, or mone attorney may pay with a credit card or check with a		
						, sign and attach the Application for Individuals to Pay	y The	
			J	<i>Installments</i> (Official I	,	only if you are filing for Chapter 7. By law, a judge ma	v but is	
			not required t your family si	to, waive your fee, and ze and you are unable	may do so only if your incom	e is less than 150% of the official poverty line that app). If you choose this option, you must fill out the <i>Appli</i> c	lies to	
9.	Have you filed for bankruptcy within the last 8 years?	■ No						
	o years:	ште	s. District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases	■ No)					
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No	Go to	line 12.				
• • • •	residence?	_ `			an eviction judament against v	ou and do you want to stay in your residence?		
		■ Ye	s.	No. Go to line 12.	a. The configuration against y	as and ab you main to diay in your roomonios:		
			_		totomoral About 5 is in	denied Activity (Foresteen)		
				Yes. Fill out <i>Initial S</i> bankruptcy petition.	taternent About an Eviction Ju	udgment Against You (Form 101A) and file it with this	5	

Deb	tor 1 Smith, Katie	24779	Doc 1	Document Page 11 of 64 Case number (if known)
Part	3: Report About Any Bu	sinesses Y	ou Own a	s a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to F	Part 4.
		☐ Yes.	Name	and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name o	of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numbe	er, Street, City, State & ZIP Code
	to this petition.		Check	the appropriate box to describe your business:
				Health Care Business (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as defined in 11 U.S.C. § 101(53A))
				Commodity Broker (as defined in 11 U.S.C. § 101(6))
				None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines.	. If you indi s, cash-flov	r Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate icate that you are a small business debtor, you must attach your most recent balance sheet, statement of w statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am no	ot filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fili Code.	ing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fili	ing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
art	4: Report if You Own or	Have Any	Hazardou	s Property or Any Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Smith, Katie

Part 5:

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Page 13 of 64 Case number (if known) Document Debtor 1 Smith, Katie **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. ■ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under □ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that after I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 ☐ More than \$50 billion □ \$100,000,001 - \$500 million □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities to □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million □ \$50,001 - \$100,000 be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Katie Smith Katie Smith Signature of Debtor 2 Signature of Debtor 1

Executed on

August 2, 2016 MM / DD / YYYY

Executed on

MM / DD / YYYY

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Document Debtor 1 Smith, Katie

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Erich Monzon	Date	August 2, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
Erich Monzon			
Printed name			
The Law Offices of Erich G. Monzon			
Firm name			
466 Central Ave Ste 34			
Northfield, IL 60093-3031			
Number, Street, City, State & ZIP Code			
(0.47) 000 0405	E 2 11		
Contact phone (847) 386-6185	Email address	emonzon@gmail.com	
99999			
Bar number & State			

Deb	tor 1 Smith, Katie			Case numbe	l' (if known)
Par	6: Answer These Questic	ons for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.	•	onsumer debts? Consumer debts are defined on al, family, or household purpose."	ed in 11 U.S.C.§ 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		usiness debts? Business debts are debts the or through the operation of the business or in	• • • • • • • • • • • • • • • • • • •
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you o	we that are not consumer debts or business d	ebis
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	Yes.	——————————————————————————————————————	Do you estimate that after any exempt property ble to distribute to unsecured creditors?	is excluded and administrative expenses are
	administrative expenses		■ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	1-49		1,000-5,000	5 25,001-50,000
	you estimate that you owe?	□ 50-99)	5001-10,000	50,001-100,000
		☐ 100-1 ☐ 200-9		1 0,001-25,000	☐ More than 100,000
19.	How much do you	\$0 - \$	250 000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to)01 - \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	be worth?		,001 - \$500,000	☐ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion
		□ \$500	,001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.	How much do you	1 co	\$50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to		001 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
	be?		,001 - \$500,000	☐ \$50,000,001 - \$100 million	☐ \$10,000,000,001 - \$50 billion
		□ \$500	,001 - \$1 million	□ \$100,000,001 - \$500 million	More than \$50 billion
Par	7: Sign Below				
For	you	l have ex	camined this petition, and I dec	lare under penalty of perjury that the information	on provided is true and correct.
			•	7, I am aware that I may proceed, if eligible, ailable under each chapter, and I choose to pro	under Chapter 7, 11,12, or 13 of title 11, United oceed under Chapter 7.
			rney represents me and I did national and read the notice required	not pay or agree to pay someone who is not an ired by 11 U.S.C. § 342(b).	attorney to help me fill out this document, i
		I reques	t relief in accordance with the	chapter of title 11, United States Code, spec	ified in this petition.
			<u> </u>	concealing property, or obtaining money or property, or imprisonment for up to 20 years, or both.	operty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Katie S Signatur		Signature of Debtor	2
		Executed	d on	Executed on	
			MM / DD / YYYY	MM	/ DD / YYYY

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nation to identify your	case and this filing:			
Katie Smith				
First Name	Middle Name	Last Name		
				
First Name	Middle Name	Last Name		
nkruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS, EASTERN DIVISIO	<u>N</u>	
				П оказы у протого
				☐ Check if this is an amended filing
				g
4.00 A /D				
rm 106A/B				
e A/B: Prop	erty			12/15
e as complete and accura e space is needed, attach tion.	ate as possible. If two married pe a separate sheet to this form. O	eople are filing together, both are n the top of any additional page	e equally responsible for su	upplying correct
Each Residence, Building	ع, Land, or Other Real Estate You	J Own or Have an Interest In		
ave any legal or equitabl	e interest in any residence, build	ling, land, or similar property?		
+ 2				
s the property:				
Your Vehicles				
ıcks, tractors, sport ut	ility vehicles, motorcycles			
Гоуоtа	Who has an interest i	in the property? Check one		claims or exemptions. Put red claims on Schedule D:
Camry	■ Debtor 1 only			aims Secured by Property.
1997	Debtor 2 only		Current value of the	Current value of the
			entire property?	portion you own?
				portion you own.
nation:	At least one of the	debtors and another		portion you own:
iauon.	Check if this is co		\$1,074.00	\$1,074.00
	rm 106A/B e A/B: Property Prop	First Name Middle Name Middle Name Middle Name Middle Name NORTHERN DISTRICT OF MORTHERN DISTRICT MO	First Name Middle Name Last Name NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISIO MIDDIAN PROPERTY Paparately list and describe items. List an asset only once. If an asset fits in more than on a sa complete and accurate as possible. If two married people are filing together, both are space is needed, attach a separate sheet to this form. On the top of any additional page ition. Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In average any legal or equitable interest in any residence, building, land, or similar property? Your Vehicles e, or have legal or equitable interest in any vehicles, whether they are registeres. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexticks, tractors, sport utility vehicles, motorcycles Toyota Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	First Name Middle Name Last Name First Name Middle Name Last Name

Household goods and furnishings
 Examples: Major appliances, furniture, linens, china, kitchenware
 □ No

Official Form 106A/B Schedule A/B: Property page 1

	Case 16-2477	79 Doc 1 Filed 08/02/10 Document	Page 17 of 64	
Debtor 1	Smith, Katie		Case number (if kno	own)
■ Yes.	Describe	usehold Goods and Furnishings		\$1,000.00
■ No	les: Televisions and radi including cell phone	os; audio, video, stereo, and digital equipr es, cameras, media players, games	ment; computers, printers, scanners; music o	collections; electronic devices
8. Collecti Example	Describe bles of value les: Antiques and figurin collections, memora		oks, pictures, or other art objects; stamp, coin	n, or baseball card collections; other
9. Equipm Example	ent for sports and hok		picycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools; musical
■ No		guns, ammunition, and related equipmen	nt	
□ No	ples: Everyday clothes, f	furs, leather coats, designer wear, shoes,	accessories	\$500.00
■ No □ Yes. 13. Non-fa Exam _i			ling rings, heirloom jewelry, watches, gems, ç	gold, silver
■ No	ther personal and house		including any health aids you did not list	
		of your entries from Part 3, including a ere	any entries for pages you have attached t	for \$1,500.00
Part 4: De	escribe Your Financial As	ssets		
Do you ov	wn or have any legal o	r equitable interest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Exam _i ■ No	ples: Money you have in	and the second s	sit box, and on hand when you file your petitic	

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Smith, Katie 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Savings Account Chase Bank Account** \$200.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No

☐ Yes. Give specific information about them...

Case 16-24779

Doc 1

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M	oney or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	■ No	
	☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property se ■ No	ttlement
	☐ Yes. Give specific information	
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation unpaid loans you made to someone else No	n, Social Security benefits;
	☐ Yes. Give specific information	
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No	
	☐ Yes. Name the insurance company of each policy and list its value.	
	Company name: Beneficiary:	Surrender or refund value:
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive product. ■ No □ Yes. Give specific information	operty because someone has
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No	
	☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set No	off claims
	☐ Yes. Describe each claim	
35	Any financial assets you did not already list	
	■ No	
	☐ Yes. Give specific information	
36	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$200.00
E-	Promite And Designed Designed Designed Control of the control of t	
Pa	Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
	Do you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.	
	☐ Yes. Go to line 38.	
Pa	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

		Case 16-24779	Doc 1	Filed 08/02/16		8/02/16 11:03:50	Desc Main	
Debt	tor 1	Smith, Katie		Document	Page 20 of	Case number (if known)		
l	☐ Yes.	Go to line 47.						
Part 1	7:	Describe All Property You C	Own or Have a	n Interest in That You Dic	l Not List Above			
		have other property of an						
	<i>Ехатрі</i> І No	les: Season tickets, country	club membe	rship				
	_	Give specific information						
	1 165. 0	ove specific information						
54.	Add th	ne dollar value of all of you	ur entries fro	om Part 7. Write that nu	ımber here			\$0.00
		•						
Part 8	8:	List the Totals of Each Part o	of this Form					
55.	Part 1:	: Total real estate, line 2 .						\$0.00
56.	Part 2:	Total vehicles, line 5			\$1,074.00			
57.	Part 3:	Total personal and hous	ehold items	line 15	\$1,500.00			
58.	Part 4:	: Total financial assets, lin	ne 36		\$200.00			
59.	Part 5:	Total business-related p	roperty, line	45	\$0.00			
60.	Part 6:	: Total farm- and fishing-re	elated prope	erty, line 52	\$0.00			
61.	Part 7:	Total other property not	listed, line 5	4 +	\$0.00			
62.	Total p	personal property. Add line	es 56 throug	n 61	\$2,774.00	Copy personal property to	ital	\$2,774.00
63.	Total o	of all property on Schedul	e A/B. Add li	ne 55 + line 62			¢2 -	774 00

Official Form 106A/B Schedule A/B: Property page 5

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			Document	Page 21 of 64		
H	l in this informa	tion to identify your case:				
De	ebtor 1	Katie Smith First Name	Middle Name	Last Name		
De	ebtor 2	riistivame	Wildle Name	Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Bank	ruptcy Court for the: NOF	RTHERN DISTRICT OF	ILLINOIS, EASTERN DIVISION		
Ca	se number					
(if k	nown)				☐ Check if this is an amended filing	
O.	fficial For	m 106C				
S	chedule	C: The Prope	rty You Cla	im as Exempt	4/16	
propout kno For spe app fun to a app Pa	perty you listed o and attach to this wn). each item of precific dollar amolicable statutor ds—may be un a particular dollaricable statutor rt 1: Identify Which set of each you are clair	n Schedule A/B: Property (Offs page as many copies of Parts page as many claim as exemptions. It is a page as many copies of Parts page as many claim as exemptions are you claim as exemptions are you claiming state and federal nonbanking federal exemptions.	t, you must specify the y, you may claim the fusuch as those for healt wever, if you claim and the property is determined by the check one only, even cruptcy exemptions. 11 J.S.C. § 522(b)(2)	gether, both are equally responsible for sular source, list the property that you claim a accessary. On the top of any additional page amount of the exemption you claim. On the firm market value of the property being the aids, rights to receive certain benefit exemption of 100% of fair market value need to exceed that amount, your exemplify your spouse is filling with you. U.S.C. § 522(b)(3)	as exempt. If more space is needed, fill is, write your name and case number (if one way of doing so is to state a nig exempted up to the amount of any is, and tax-exempt retirement under a law that limits the exemption	
۷.		of the property and line on	Specific laws that allow exemption			
		at lists this property	Current value of the portion you own	Amount of the exemption you claim	•	
			Copy the value from Schedule A/B	Check only one box for each exemption.		
	Toyota		\$1,074.00		735 ILCS 5/12-1001(c)	
	Camry 1997			100% of fair market value, up to		
	159000			any applicable statutory limit		
	Line from Sche	dule A/B: 3.1				
		Goods and Furnishings	\$1,000.00		735 ILCS 5/12-1001(b)	
	Line from Sche	dule A/B: 6.1		■ 100% of fair market value, up to		
				any applicable statutory limit		
	Wardrobe		\$500.00	П	735 ILCS 5/12-1001(a)	
	Line from Sche	dule A/B: 11.1	Ψοσο.σο	4000/ of fair more last value, we to		
				100% of fair market value, up to any applicable statutory limit		
	Chase Bank	Account	*	_	735 ILCS 5/12-1001(b)	
	Line from Sche		\$200.00	<u> </u>	733 ILC3 3/12-1001(b)	
				100% of fair market value, up to any applicable statutory limit		
3.		ing a homestead exemption estment on 4/01/19 and every 3				

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes Official Form 106C

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Case 16-2/779 Doc 1 Filed 08/02/16 Entered 08/02/16 11:03:50 Desc Main

Cas	66 10-24113	Docume Docume		23 of 64	03.30 Desc	, iviaii i
Fill in this informa	ation to identify you			3 01 04		
Debtor 1	Katie Smith First Name	Middle Name	Last Name			
Debtor 2	-					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EAS	TERN DIVISION		
Case number						
(if known)					. –	eck if this is an ended filing
Official Form	106D					
		Who Have Clai	ims Secure	ed by Propert	У	12/15
		f two married people are filing t, number the entries, and atta				
1. Do any creditors h	ave claims secured by	your property?				
□ No. Check t	his box and submit th	is form to the court with your	other schedules. Yo	u have nothing else to re	port on this form.	
Yes. Fill in a	all of the information be	elow.				
Part 1: List All	Secured Claims					
		nore than one secured claim, list			Column B	Column C
		a particular claim, list the other cal order according to the creditors		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Chase Aut	o Finance	Describe the property that s	ecures the claim:	\$0.00	\$0.0	
Creditor's Name						
National B	ankruptcy					
Dept 201 N Cent	ral Ave MSC	As of the date you file, the c	laim is: Check all that			
AZ1-1191	irai Ave Misc	apply.				
Phoenix, A	Z 85004	☐ Contingent				
	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that	apply.			
Debtor 1 only		☐ An agreement you made (s	such as mortgage or s	ecured		
Debtor 2 only		car loan)				
Debtor 1 and Deb	tor 2 only	☐ Statutory lien (such as tax	lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a laws	uit			
Check if this clai		Other (including a right to o	offset)			
Date debt was incur	red 2008-03	Last 4 digits of accou	ınt number 2406	3		
Add the deller velve	of wave autrica in Cal	A on this name \M/vita tha	t number berei	60	.00	
	-	umn A on this page. Write tha e dollar value totals from all p			0.00	
Write that number h			g	\$0	0.00	
Part 2: List Other	ers to Be Notified for	r a Debt That You Already I	Listed			
Use this page only i	f you have others to be	e notified about your bankrup we to someone else, list the c	tcy for a debt that yo reditor in Part 1, and	then list the collection ag	ency here. Similarly,	if you have more
	r any of the debts that not fill out or submit th	you listed in Part 1, list the ac is page.	iditional creditors he	re. If you do not have add	litional persons to be	notified for any
	er, Street, City, State & 2	Zip Code	On w	hich line in Part 1 did you e	nter the creditor? 2.	<u>1</u>
PO Box 90			Last 4	4 digits of account number	2406	

Fort Worth, TX 76101-2003

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		Document	Page 24 of 64	
Fill in this	information to identify your	case:		
Debtor 1	Katie Smith			
Dobto. 1	First Name	Middle Name	Last Name	- }
Debtor 2				
(Spouse if, filin	ng) First Name	Middle Name	Last Name	
United Stat	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF IL	LLINOIS, EASTERN DIVISION	_
Caca numh	oor			
Case numb (if known)	<u> </u>			☐ Check if this is an
				amended filing
S(C) - 1 - 1 - 1	E 400E/E			
	Form 106E/F			4044=
		ho Have Unsecured		12/15 NONPRIORITY claims. List the other party to
schedule G: 0: Creditors he Continua ase number	Executory Contracts and Unexp Who Have Claims Secured by Pration Page to this page. If you have (if known).	ired Leases (Official Form 106G). I operty. If more space is needed, c ve no information to report in a Pa	Do not include any creditors with particopy the Part you need, fill it out, numb	vB: Property (Official Form 106A/B) and on ally secured claims that are listed in Schedule er the entries in the boxes on the left. Attach ny additional pages, write your name and
	List All of Your PRIORITY Un			
	creditors have priority unsecure	d claims against you?		
	Go to Part 2.			
☐ Yes.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any	creditors have nonpriority unsec	cured claims against you?		
□ No. `	You have nothing to report in this p	art. Submit this form to the court with	your other schedules.	
Yes.				
unsecur	ed claim, list the creditor separately	for each claim. For each claim lister		creditor has more than one nonpriority ist claims already included in Part 1. If more red claims fill out the Continuation Page of Part
				Total claim
	coa Billing Center	Last 4 digits of ac	count number	\$0.00
	npriority Creditor's Name dwest Emergency Assoc	iates. When was the deb	ot incurred?	
LL				
_	D Box 740023			
	ncinnati, OH 45274-0023	A of the date year	stile the element Check all that apply	
	mber Street City State Zlp Code no incurred the debt? Check one.	As of the date you	u file, the claim is: Check all that apply	
	Debtor 1 only	Пол		
		☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	DITY unaccured eleter	
	At least one of the debtors and and		RITY unsecured claim:	
∐ del	Check if this claim is for a com	numity	ing out of a consention	voo thot vou did not
	the claim subject to offset?	Doligations aris report as priority cla	ing out of a separation agreement or divo	rce mai you did not
	No	<u>-i</u> ' '	on or profit-sharing plans, and other simila	r debts
	Yes	<u> </u>	, 1 1 1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
	162	Other. Specify		

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Case number (if know) Debtor 1 Smith, Katie 4.2 \$0.00 **ARS** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **ARS** PO Box 630806 Cincinnati, OH 45263-0806 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Chase Bank USA, NA Last 4 digits of account number 2010 \$5,776.00 Nonpriority Creditor's Name When was the debt incurred? 2009-08 PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.4 Chase Bank USA, NA Last 4 digits of account number \$1,083.00 6537 Nonpriority Creditor's Name When was the debt incurred? 2008-10 PO Box 15298 Wilmington, DE 19850-5298 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed \square At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans \square Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Debie	Siliui, Raue						
4.5	City fo Chicago EMS	Last 4 digits of account number		\$0.00			
	Nonpriority Creditor's Name City of Chicago EMS 33589 Treasury Ctr Chicago, IL 60694-3500	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□Yes	Other. Specify					
4.6	COMCAST Nonpriority Creditor's Name	Last 4 digits of account number	1808	\$257.00			
	Nonpholity ordator of Namo	When was the debt incurred?	2015-01				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
47	Commission Condit INC	Lock A digito of account number		£0.00			
4.7	Computer Cerdit, INC Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00			
	St. Alexius Medical Center 22589 Network Pl	When was the debt incurred?					
	Chicago, IL 60673-1225	_					
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another ☐ Type of NONPRIORITY unsecured claim:						
	At least one of the debtors and another	Student loans	u Glaiiii.				
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	action agreement of divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					

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	- Thirting I tatilo		
4.8	Creditors Discount & Audit.com	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Creditors Discount & Audit Co.	When was the debt incurred?	
	415 E Main St Streator, IL 61364-2927		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
		· · · · · · · · · · · · · · · · · · ·	
	Yes	Other. Specify	
4.9	Ge Capital Retail Bank Nonpriority Creditor's Name	Last 4 digits of account number 1735	\$975.00
	Nonphonty Creditor's Name	When was the debt incurred? 2012-11	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	Other. Specify	
		— Other: Specify	
4.10	Illinois Collection Service	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name Illinois Collection Service INC PO Box 1010	When was the debt incurred?	
	Tinley Park, IL 60477-9110	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		· ·	

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Smith, Katie	Case number (f know)	
Illinois Department Employment		
Security	Last 4 digits of account number 3043	\$1,026.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 19509		
Springfield, IL 62794-9509	-	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
<u></u>		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Kohls/Capital One	Last 4 digits of account number 7745	\$978.00
Nonpriority Creditor's Name		ψ370.00
	When was the debt incurred? 2010-03-29	
PO Box 3120		
Milwaukee, WI 53201-3120 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Malcolm S. Gerald and Associates,		
Inc	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name	When we the debt in some do	
	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other, Specify	

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Page 29 of 64 Case number (f know) Debtor 1 Smith, Katie 4.14 Last 4 digits of account number \$786.00 Medical 6921 Nonpriority Creditor's Name When was the debt incurred? Unknown Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.15 1282 Medical Last 4 digits of account number \$65.00 Nonpriority Creditor's Name When was the debt incurred? 2014-06 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.16 **Medical Recovery Specialists** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name **Medical Recovery Specialists, LLC** When was the debt incurred? 2250 E Devon Ave Ste 352 Des Plaines, IL 60018-4521 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Siliui, Naue	Odde Hamber (I know)	
MiraMed Revenue Group	Last 4 digits of account number	\$0.00
MiraMed Revenue Group Dept	When was the debt incurred?	
PO Box 77000 Detroit, MI 48277-2000 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
_	Continuent	
	-	
	`	
•		
	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
NorthShore University		
HealthSystem	Last 4 digits of account number	\$0.00
Billing Department	When was the debt incurred?	
Chicago, IL 60673-1230		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
_		
■ Debtor 1 only	☐ Contingent	
	☐ Unliquidated	
Debtor 1 and Debtor 2 only	·	
	<u> </u>	
Is the claim subject to offset?	report as priority claims	
	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Norwood Park Fire Prot Dist	Last 4 digits of account number	\$0.00
Norwood Park Fire Prot Dist 7447 W Lawrence Ave	When was the debt incurred?	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
	MiraMed Revenue Group Nonpriority Creditor's Name MiraMed Revenue Group Dept 77304 PO Box 77000 Detroit, MI 48277-2000 Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes NorthShore University HealthSystem Nonpriority Creditor's Name Billing Department 23056 Network PI Chicago, IL 60673-1230 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Norwood Park Fire Prot Dist Nonpriority Creditor's Name Norwood Park Fire Prot Dist 7447 W Lawrence Ave Harwood Heights, IL 60706-3411 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Bettor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Nombroity Creditor's Name When was the debt incurred?

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Debtor 1 Smith, Katie Case number (if know) 4.20 \$0.00 **Peoples Gas** Last 4 digits of account number 3907 Nonpriority Creditor's Name When was the debt incurred? 2013-10 200 E Randolph St FI 20 Chicago, IL 60601-6431 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.21 **Presence Resurrection Med CTR** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? Grant & Weber, Inc 861 Coronado Center Dr Ste 211 Henderson, NV 89052-3992 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans \square Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.22 **Radiological Consultants of Wo** Last 4 digits of account number \$88.00 2756 Nonpriority Creditor's Name When was the debt incurred? 2013-10 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify

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1 Smith, Katie		Case number (f know)	
Schaumburg Township District Nonpriority Creditor's Name	Last 4 digits of account number	7762	\$218.00
Nonpholicy Grounds of Name	When was the debt incurred?	2013-02	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	on plane, and other circiles debte	
■ No □ Yes	Other. Specify Other Specify	ig plans, and other similar debts	
- 163	- Other. Specify		
Synchrony Bank/ Jc Penneys	Last 4 digits of account number	2454	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	2009-06-19	
PO Box 965064		2000 00 10	
Orlando, FL 32896-5064			
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated		
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans	a Gainn	
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	, , , , , , , , , , , , , , , , , , , ,	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
Synchrony Bank/ Old Navy	Last 4 digits of account number	2019	\$0.00
Nonpriority Creditor's Name	_		V 0.00
BO Box 065064	When was the debt incurred?	2008-10-19	
PO Box 965064 Orlando, FL 32896-5064			
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	<u> </u>	.g F 3 3 3 40010	
■ res	Other, Specify		

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Debio	Smith, Katie		Case number (it know)	
4.26	Synchrony Bank/Care Credit	Last 4 digits of account number	5537	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	2011-02-11	
	PO Box 965064		2011 02 11	
	Orlando, FL 32896-5064			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.27	Tnb-Visa (TV) / Target	Last 4 digits of account number	0517	\$1,032.00
	Nonpriority Creditor's Name	- When we die debt in some do	0040.00	
	C/O Financial & Retail Services Mailstop	When was the debt incurred?	2010-03	
	PO Box 9475			
	Minneapolis, MN 55440-9475	_		
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
			g plans, and other similar debts	
	Yes	Other. Specify		
4.28	Unknown	Last 4 digits of account number	1281	\$45.00
	Nonpriority Creditor's Name	_		· · · · · · · · · · · · · · · · · · ·
		When was the debt incurred?	2014-06	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other Specify		

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Debtor 1 Smith, Katie Case number (if know) 4.29 \$30.00 Unknown Last 4 digits of account number 1280 Nonpriority Creditor's Name When was the debt incurred? 2014-06 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.30 **World Financial Network Bank** Last 4 digits of account number 5184 \$1,165.00 Nonpriority Creditor's Name When was the debt incurred? 2013-05 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Ars Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1801 NW 66th Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Fort Lauderdale, FL 33313-4571 Last 4 digits of account number 1282 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Convergent Outsourcing Line **4.6** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 800 SW 39th St ■ Part 2: Creditors with Nonpriority Unsecured Claims Renton, WA 98057-4975 Last 4 digits of account number 1808 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Creditors Discount & A** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 415 E Main St ■ Part 2: Creditors with Nonpriority Unsecured Claims Streator, IL 61364-2927 Last 4 digits of account number 2756 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Kohls/Capital One Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 3115 Part 2: Creditors with Nonpriority Unsecured Claims Milwaukee, WI 53201-3115 Last 4 digits of account number 7745

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Debtor 1 Smith, Katie		Case number (if know)				
Name and Address Midland Funding	On which entry in Part 1 or Part 2 d Line 4.9 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims				
2365 Northside Dr Ste 30		Part 2: Creditors with Nonpriority Unsecured Claims				
San Diego, CA 92108-2709	Last 4 digits of account number	1735				
Name and Address	On which entry in Part 1 or Part 2 d					
Miramedrg 991 Oak Creek Dr	Line 4.14 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims				
Lombard, IL 60148-6408	land delimita of account according	Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	6921				
Name and Address	On which entry in Part 1 or Part 2 d	· <u> </u>				
Peoples Engy 200 E Randolph St	Line 4.20 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims				
Chicago, IL 60601-6436		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	3907				
Name and Address		On which entry in Part 1 or Part 2 did you list the original creditor?				
Portfolio Recovery Ass 120 Corporate Blvd Ste 1	Line <u>4.30</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims				
Norfolk, VA 23502-4962		■ Part 2: Creditors with Nonpriority Unsecured Claims				
,	Last 4 digits of account number	5184				
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
Syncb/Care Credit	Line 4.26 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
C/o PO Box 965036		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Orlando, FL 32896-5036						
	Last 4 digits of account number	5537				
Name and Address		On which entry in Part 1 or Part 2 did you list the original creditor?				
Syncb/jc Penneys	Line 4.24 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
PO Box 965007 Orlando, FL 32896-5007		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number	2454				
Name and Address	Address On which entry in Part 1 or Part 2 did you list the original creditor?					
Syncb/Old Navy	Line 4.25 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims				
PO Box 965005 Orlando, FL 32896-5005						
5. iai.a5, 1 2 52555 5555	Last 4 digits of account number	2019				
Name and Address	On which entry in Part 1 or Part 2 d	id you list the original creditor?				
Td Bank USA/Targetcred	Line <u>4.27</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 673		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Minneapolis, MN 55440-0673	Last 4 digits of account number	0517				
Name and Address On which entry in Part 1 or Part 2 did you list the original cred		id you list the original creditor?				
Unique National Collec	Line 4.23 of (Check one):	Part 1: Creditors with Priority Unsecured Claims				
119 E Maple St Jeffersonville, IN 47130-3439						
Jeneraonvine, III 47 130-3433	Last 4 digits of account number	7762				
Part 4: Add the Amounts for Each Typ						
Total the amounts of certain types of unsec type of unsecured claim.	ured claims. This information is for statist	ical reporting purposes only. 28 U.S.C. §159. Add the amounts for each				
type 3: unocoured cidiiii		Total Claim				
6a. Domestic support of	ligations	6a. \$ 0.00				

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

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Debtor 1 Smith, Katie

	,			`	, <u> </u>
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total claims from Part 2	6f. 6g. 6h.	Student loans	6f.	\$	Total Claim 0.00
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	13,524.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	13,524.00

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		DUGUITE	III PAUE 37 ULO4	
Fill in this infor	mation to identify your	case:		
Debtor 1	Katie Smith			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVIS	ON
Case number (if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	whom you have the r, Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

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		Docume	<u>nt Page 38 d</u>	of 64	
Fill in this	information to identify your	case:			
Debtor 1	Katia Cmith				
Debioi i	Katie Smith First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	RN DIVISION	
Case numl	her				
(if known)				☐ Check if this is	an
				amended filing	J
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
Ounca	iaic III. Tour oou				12/13
1. Do y No Yes	er (if known). Answer every o	question. you are filing a joint case, do	o not list either spouse a		
Califor	rnia, Idaho, Louisiana, Nevada, Go to line 3. Did your spouse, former spou	New Mexico, Puerto Rico,	Texas, Washington, ar	y? (<i>Community property states and territories</i> includ nd Wisconsin.)	ie Arizona,
line 2 106D), Colum	again as a codebtor only if th , Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sur	if your spouse is filing with you. List the person e you have listed the creditor on Schedule D (Of se Schedule D, Schedule E/F, or Schedule G to f	fficial Form
1	Name, Number, Street, City, State and 2	IP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
_					
	Number Street City	State	ZIP Code		
				_	
3.2	Name			Schedule D, line	
	Hamo			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street				
	City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:							
Del	otor 1 Katie Smith				_				
_	otor 2 puse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS, I	EASTERN	_				
	se number nown)		-			Check if this is An amende A supplement income as	ed filing ent showing		chapter 13
0	fficial Form 106I					MM / DD/ \	/YYY		
S	chedule I: Your Inc	ome				WINT DD			12/15
sup spo atta	as complete and accurate as poss plying correct information. If you use. If you are separated and you ch a separate sheet to this form. On the complex periods are provided in the complex periods.	are married and not filin r spouse is not filing wit	g jointly, and you h you, do not inc	ır spouse is l lude informa	living tion a	with you, included bout your spou	de informa se. If more	tion about ye space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-fil	ing spouse	
	If you have more than one job,	Employment status*	■ Employed			☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employe	ed		☐ Not e	mployed		
	employers.	Occupation	See Schedu	e Attached					
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student of homemaker, if it applies.	or Employer's address							
		How long employed th		Attachment f	for Ac	Iditional Emplo	ment Info	rmation	
Par	Tt 2: Give Details About Mor	nthly Income							
	mate monthly income as of the dass you are separated.	ate you file this form. If y	ou have nothing to	report for any	line, v	write \$0 in the sp	ace. Include	e your non-filir	ng spouse
	u or your non-filing spouse have mor ce, attach a separate sheet to this for		oine the informatio	n for all emplo	yers f	or that person on	the lines be	elow. If you ne	ed more
					F	For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, c			2.	\$_	2,658.50	\$	N/A	
3.	Estimate and list monthly overti	ime pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$_	2,658.50	\$	N/A	

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Deb	tor 1	Smith, Katie	_	Case	number (if known)			
				For	Debtor 1		ebtor 2 or ling spouse	
	Сор	y line 4 here	4.	\$	2,658.50	\$	N/A	
E	l int				<u> </u>			
5.		all payroll deductions:	_	•		•		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$ \$	575.50	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	* *	0.00	\$	N/A	
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c.	\$ _	0.00	\$	N/A	
	5u. 5e.	Insurance	5d. 5e.	\$ _	0.00	\$	N/A N/A	
	5f.	Domestic support obligations	5f.	\$ <u></u> _	0.00	\$	N/A	
	5g.	Union dues	5g.	\$—	0.00	\$——	N/A	
	5h.	Other deductions. Specify:	5g. 5h.+	· : —		+ \$	N/A	
_		· · · · · · · · · · · · · · · · · · ·		· · ·		· : —		
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ <u> </u>	575.50	\$	N/A	
7.	Caid	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,083.00	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	t 8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00		N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,083.00 + \$		N/A = \$ 2,	083.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ΙΟ. Ψ		. ⁴ _			003.00
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your driftends or relatives. not include any amounts already included in lines 2-10 or amounts that are not aw	lependen		•		e <i>J.</i> 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ 2, (083.00
12	De -	volue overest on increase or decrease within the array of the state of the state of					monthly in	
13.	■	ou expect an increase or decrease within the year after you file this form No.						
		Yes. Explain:						

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Debtor 1	Smith, Katie	Case number (if known)	

Official Form B 6I Attachment for Additional Employment Information

Debtor		
Occupation		
Name of Employer	Farmington Bath & Tennis Club	
How long employed	2 months	
Address of Employer	PO Box 445	
	Lake Zurich, IL 60047-0445	
Debtor		
Occupation		
Name of Employer	The County School & Clubhouse	
How long employed		
Address of Employer	20400 N Old Hicks Rd	
	Long Grove, IL 60047-8995	

Official Form 106I Schedule I: Your Income page 3

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Debtor 1 Katie Smith	Che	eck if this is:	
		An amended filing	
Debtor 2 (Spouse, if filing)		A supplement show expenses as of the f	ing postpetition chapter 13 following date:
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION		MM / DD / YYYY	
Case number (If known)			
Official Form 106J			
Schedule J: Your Expenses			12/1:
Be as complete and accurate as possible. If two married people are filing together, both are einformation. If more space is needed, attach another sheet to this form. On the top of any add (if known). Answer every question.			
Part 1: Describe Your Household 1. Is this a joint case?			
■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?			
☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of I	Debto	or 2.	
2. Do you have dependents? ■ No			
Do not list Debtor 1 and Yes. Fill out this information for Debtor 2. Popendent's relationship Debtor 2 Dependent Debtor 2 Dependent Debtor 2	to	Dependent's age	Does dependent live with you?
Do not state the			□ No
dependents names.			Yes
			□ No □ Yes
			□ No
			☐ Yes
			□ No
3. Do your expenses include			☐ Yes
expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, checapplicable date.			
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)		Your expe	enses
(Gillotal I Gilli 1981)			
 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 	4.	\$	725.00
If not included in line 4:			
4a. Real estate taxes	4a.	\$	0.00
	4b.		0.00
	4c.	·	0.00
4d. Homeowner's association or condominium dues5. Additional mortgage payments for your residence, such as home equity loans	4d. 5.		0.00

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. U 1 6a	ilities: . Electricity, heat, natu	rol gos	6a	. \$	100.00
6b	•	•	6b	· · · · · · · · · · · · · · · · · · ·	100.00
				· <u> </u>	50.00
60 60		e, Internet, satellite, and cable services	6d	·	150.00
	· · · —	umpline.		· · · · · · · · · · · · · · · · · · ·	0.00
	ood and housekeeping s	••	7	· -	350.00
_	nildcare and children's e		8	· · · · · · · · · · · · · · · · · · ·	0.00
	othing, laundry, and dry	_	9	·	75.00
	ersonal care products an		10	·	75.00
	edical and dental expens		11	. \$	100.00
		s, maintenance, bus or train fare.	12	. \$	240.00
	o not include car payment	eation, newspapers, magazines, and books	13	· <u> </u>	150.00
	naritable contributions a		14	· -	0.00
	surance.	na rengious uonations	17	. Ψ	0.00
		educted from your pay or included in lines 4 or 20			
	a. Life insurance	radoted from your pay or included in inico 1 of 20	15a	. \$	0.00
15	b. Health insurance		15b	. \$	0.00
15	c. Vehicle insurance		150	. \$	50.00
	d. Other insurance. Spec	sify:	15d		0.00
	·	deducted from your pay or included in lines 4 or 2		· ——	0.00
	ecify:		16	. \$	0.00
7. In	stallment or lease payme	ents:	_		
17	a. Car payments for Veh	icle 1	17a	. \$	0.00
17	b. Car payments for Veh	icle 2	17b	. \$	0.00
17	c. Other. Specify:		17c	. \$	0.00
17	d. Other. Specify:		17d	. \$	0.00
3. Y (our payments of alimony	r, maintenance, and support that you did not r			
		n line 5, Schedule I, Your Income (Official For	n 106I). 18		0.00
		e to support others who do not live with you.		\$	0.00
	ecify:		19		
		ses not included in lines 4 or 5 of this form or			
	a. Mortgages on other p	орепу		. \$	0.00
	b. Real estate taxes			. \$	0.00
	c. Property, homeowner		200	·	0.00
	d. Maintenance, repair, a		20d	· -	0.00
		ation or condominium dues		. \$	0.00
1. O 1	her: Specify:		21	+\$	0.00
2. C :	alculate your monthly ex	penses			
	a. Add lines 4 through 21	•		S	2,065.00
		expenses for Debtor 2), if any, from Official Form	106J-2	\$	2,000.00
	, , , ,	The result is your monthly expenses.		\$	2.065.00
22	.c. Add lifte 22a arid 22b.	The result is your monthly expenses.		"	2,065.00
	alculate your monthly ne				
23	a. Copy line 12 (your co.	mbined monthly income) from Schedule I.	23a	. \$	2,083.00
23	b. Copy your monthly ex	penses from line 22c above.	23b	\$	2,065.00
					·
23		expenses from your monthly income.	00 -	e	18.00
	The result is your mor	nthly net income.	230	. [\$	18.00
Fo mo	r example, do you expect to to diffication to the terms of you	e or decrease in your expenses within the year finish paying for your car loan within the year or do you r mortgage?			rease or decrease because c
Fo mo	you expect an increase r example, do you expect to to diffication to the terms of you No.	e or decrease in your expenses within the year finish paying for your car loan within the year or do you	after you file this expect your mortgage	form?	rease or dec

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Fill in this inform	mation to identify your	case:				
Debtor 1	Katie Smith					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTERN	DIVISION		
Case number (if known)					☐ Check if this is an amended filing	
Official Forr						
Declarat	tion About a	ın Individual	Debtor's So	chedules	12	2/15
obtaining money years, or both. 1		connection with a bankr			ent, concealing property, or or imprisonment for up to 20	
Did you pa	y or agree to pay some	one who is NOT an attorn	ney to help you fill out ba	nkruptcy forms?		
■ No						
☐ Yes. N	Name of person				ruptcy Petition Preparer's Notic and Signature (Official Form 11	
	Ity of perjury, I declare t	that I have read the sumn	nary and schedules filed	with this declaration	and	
X /s/ Kat Katie S Signatu			X Signature of	Debtor 2		
3						

Date ____

Date August 2, 2016

Fill in this info	ormation to identify your	case:			
Debtor 1	Katie Smith				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name	.	
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, EASTER	N DIVISION	
Case number (if known)					☐ Check if this is an amended filing
	rm 106Dec ation About a	an Individual	Debtor's S	chedules	12/15
obtaining mon	—	connection with a bank		_	ent, concealing property, or or imprisonment for up to 20
S	ign Below				
Did you p	pay or agree to pay some	one who is NOT an attorn	ney to help you fill out b	ankruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
•	nalty of perjury, I declare are true and correct.	that I have read the sumn		d with this declaration	and
	Smith ture of Debtor 1		X Signature of	of Debtor 2	

Date ____

Date ____

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		Docume	nt Page 46 of 64	
Fill in this infor	mation to identify your	case:		
Debtor 1	Katie Smith			
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS, EASTERN DIVISIO	ON
Case number				
(if known)				☐ Check if this is ar amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,774.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,774.00
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	13,524.00
	Your total liabilities	\$	13,524.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	2,083.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,065.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner schedu	es.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose " 11 LLS C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 LLS C§ 159	ersonal, fan	nily, or household

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Page 47 of 64 Case number (if known) Debtor 1 Smith, Katie

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 8. 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,992.83 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Bort 4 on Colombia E/E against a fall and an	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in	this inform	ation to identify your	case:					
Debto	or 1	Katie Smith						
		First Name	Middle Name	Last Name				
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name				
Unite	d States Bar	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS, EASTERN DIVI	SION			
Case	number							
(if knov					_	theck if this is an mended filing		
∩ffi	cial For	m 107						
			Affairs for Individ	luals Filing for B	ankruptcy	4/10		
					qually responsible for supply additional pages, write your i			
if kno	wn). Answe	r every question.						
Part '	Give D	etails About Your Ma	rital Status and Where You	Lived Before				
I. V	/hat is your	current marital statu	s?					
	☐ Married ■ Not marr	ried						
2. D								
	During the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. List	all of the places you liv	ved in the last 3 years. Do not i	nclude where you live now.				
I	Debtor 1 Pri	or Address:	Dates Debtor 1 I	ived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there		
					y property state or territory? o, Texas, Washington and Wis			
	_	,	, ,		, ,	,		
	■ No] Yes. Mal	ke sure vou fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	cial Form 106H).				
		·	,	,				
Part 2	Explain	the Sources of You	r Income					
F	ill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a lave income that you receive to	Il businesses, including part-t		ar years?		
г] No							
Ī	_	in the details.						
			Debtor 1		Debtor 2			
			Sources of income	Gross income	Sources of income	Gross income		
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)		
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$12,834.00	☐ Wages, commissions, bonuses, tips			
			☐ Operating a business		☐ Operating a business			

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Page 49 of 64 Document ase number (if known) Debtor 1 Smith, Katie Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$16,884.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a business ☐ Operating a business \$11,106.00 For the calendar year before that: ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: Cancellation of Debt \$1.083.00 (January 1 to December 31, 2015) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

> No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for

this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... still owe paid

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7.	Within 1 year before you filed for bankruptor <i>Insiders</i> include your relatives; any general partn which you are an officer, director, person in cont business you operate as a sole proprietor. 11 U.S.	ers; relatives of any gener rol, or owner of 20% or mo	al partners; partnershi ore of their voting secu	ps of which you are rities; and any man	e a general partr aging agent, inc	ner; corporations of cluding one for a
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	Within 1 year before you filed for bankruptcy insider? Include payments on debts guaranteed or cosign		rments or transfer ar	ny property on ac	count of a deb	t that benefited an
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment tor's name
Par	t 4: Identify Legal Actions, Repossessions	s. and Foreclosures				
	List all such matters, including personal injury cannot contract disputes. No Yes. Fill in the details.	ases, small claims actions	, divorces, collection s	uits, paternity action	ns, support or c	ustody modifications,
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below No. Go to line 11.		erty repossessed, fo	reclosed, garnish	ed, attached, s	seized, or levied?
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happene				property
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment because No Yes. Fill in the details.	cy, did any creditor, inc		ancial institution,	set off any am	ounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an		erty in the possessio	on of an assignee	for the benefit	of creditors, a
	■ No □ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupte	cy, did you give any gift	s with a total value o	of more than \$600	per person?	
	Yes. Fill in the details for each gift.			_		
	Gifts with a total value of more than \$600 person	er Describe the gifts		Dates the g	s you gave ifts	Value

Address:

Person to Whom You Gave the Gift and

Case 16-24779 Doc 1 Filed 08/02/16 Entered 08/02/16 11:03:50 Desc Main Document Page 51 of 64 Case number (if known) Debtor 1 Smith, Katie 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment or Amount of **Address** transferred transfer was payment **Email or website address** made

Person Who Made the Payment, if Not You The Law Offices of Erich G. Monzon 1500 \$1,500.00 466 Central Ave Ste 34 Northfield, IL 60093-3031

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment or Amount of Address transferred transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was payments received or debts Address property transferred made paid in exchange Person's relationship to you

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

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■ No	ection devices.)						
Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Trans	sfer was	
rt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit	Boxes, and Sto	rage Units				
sold, moved, or transferred? Include checking, savings, money market, or	other financial accoun	ts; certificates	of deposit;		,	,	
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last baland closing or		
Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
■ No □ Yes. Fill in the details.							
Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City, State		escribe the contents			
Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
■ No □ Yes. Fill in the details.							
Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City, State		the contents	Do you have it?		
rt 9: Identify Property You Hold or Control f	or Someone Else						
someone.	neone else owns? Inclu	de any propert	y you borro	owed from, are storing	for, or hold in t	trust for	
Owner's Name Address (Number, Street, City, State and ZIP Code)			Describe	the property		Value	
	No Yes. Fill in the details. Name of trust Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Do you now have, or did you have within 1 yeash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Tyes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) I dentify Property You Hold or Control for Do you hold or control any property that som someone. No Yes. Fill in the details. Owner's Name	Yes. Fill in the details. Name of trust Description and with the details. Name of trust Description and with the details. Within 1 year before you filed for bankruptcy, were any financial account nouses, pension funds, cooperatives, associations, and other financial account nouses, pension funds, cooperatives, associations, and other financial account number and count number. Last 4 digits of account number account number account number. No Yes. Fill in the details. Who else had account number, street, City, State and ZIP Code) Who else had account number, street, City, State and ZIP Code) To it? Address (Number, Street, City, State and ZIP Code) Who else has or to it? Address (Number, Street, City, State and ZIP Code) To it? Address (Number, Street, City, State and ZIP Code) Who else has or to it? Address (Number, Street, City, State and ZIP Code) Who else has or to it? Address (Number, Street, City, State and ZIP Code) Who else has or to it? Address (Number, Street, City, State and ZIP Code) Who else has or to it? Address (Number, Street, City, State and ZIP Code) Who else has or to it? Address (Number, Street, City, State and ZIP Code)	No Yes. Fill in the details. Name of trust Description and value of the pro Title: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Store Within 1 year before you filed for bankruptcy, were any financial accounts or instrusold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates houses, pension funds, cooperatives, associations, and other financial institutions No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Do you now have, or did you have within 1 year before you filed for bankruptcy, an cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or place other than your home within 1 No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Type of account number Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Type Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any propert someone. No Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code)	No Yes. Fill in the details. Name of trust Description and value of the property trans List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe depocash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Lo you hold or control any property that someone else owns? Include any property you borrosomeone. No Yes. Fill in the details. Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Do you hold or control any property that someone else owns? Include any property you borrosomeone.	No	No	

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-24779 Doc 1 Filed 08/02/16 Entered 08/02/16 11:03:50 Page 53 of 64 Document ase number (if known) Debtor 1 Smith, Katie 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Date of notice Environmental law, if you Name of site Governmental unit Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο П Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No П Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Katie Smith

Signature of Debtor 2

Date August 2, 2016

Signature of Debtor 1

Date

Page 54 of 64 Case number (if known) Document Debtor 1 Smith, Katie Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ☐ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Del	otor 1	Smith, Katie		Case number (if known)					
24.	Has	any governmental unit notified you	that you may be liable or potentially liable u	ınder or in violation of an environn	nental law?				
		No Yes Fill in the details.							
		me of site	Governmental unit le) Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit	t of any release of hazardous material?						
		No Yes. Fill in the details.							
			Governmental unit le) Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or	administrative proceeding under any enviro	onmental law? Include settlements	and orders.				
		No							
		Yes. Fill in the details.							
			Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	t 11:	Give Details About Your Business	or Connections to Any Business						
27	VA/I4	hin 4 years hefere you filed for hankr	untou did vou oum a husiness or have any	of the following connections to an	v husiness?				
21.									
	_	□ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go	to Part 12.						
		Yes. Check all that apply above and	fill in the details below for each business.						
			Describe the nature of the business	• •					
			Name of accountant or bookkeeper	Dates business existed					
28.			uptcy, did you give a financial statement to	anyone about your business? Inc	lude all financial				
		No Yes. Fill in the details below.							
	Ad	dress	Date Issued						
Pai	t 12:	Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State an							
true ban 18 L	and krup	correct. I understand that making a f	false statement, concealing property, or obt	taining money or property by fraud					

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Official Form 107

Date

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Date

Fill in this info	ormation to identify your case:		Check o	ne box onlv as d	irected in this form and	in Form
Debtor 1	Katie Smith		122A-1S			
Debtor 2			■ 1.	There is no pres	umption of abuse	
(Spouse, if filing)			_	•	o determine if a presur	mation of abuse
United States	s Bankruptcy Court for the: Northern District of Division	of Illinois, Eastern		applies will be m	nade under <i>Chapter 7 l</i> l cial Form 122A-2).	•
Case numbe (if known)	er		3.		does not apply now bed out it could apply later.	ause of qualified
			□ CI	neck if this is a	n amended filing	
Official	Form 122A - 1					
Chapte	r 7 Statement of Your Cur	rent Month	ly Incom	е		12/1
a separate she number (if kno military service	e and accurate as possible. If two married people a set to this form. Include the line number to which the own). If you believe that you are exempted from a p e, complete and file Statement of Exemption from Calculate Your Current Monthly Income	ne additional informatio resumption of abuse be	on applies. On the ecause you do n	e top of any addit ot have primarily	ional pages, write your i consumer debts or beca	name and case ause of qualifying
1. What is	s your marital and filing status? Check one on	ly.				
■ Not	married. Fill out Column A, lines 2-11.					
☐ Marı	ried and your spouse is filing with you. Fill ou	it both Columns A and	d B, lines 2-11.			
□ Marı	ried and your spouse is NOT filing with you.	You and your spous	e are:			
_	iving in the same household and are not lega	•		•		
р	iving separately or are legally separated. Fill of enalty of perjury that you and your spouse are lego spart for reasons that do not include evading the N	gally separated under n	nonbankruptcy la	w that applies or	•	
101(10A). F 6 months, a	average monthly income that you received from all For example, if you are filing on September 15, the 6-med the income for all 6 months and divide the total by me rental property, put the income from that property in	nonth period would be Ma 6. Fill in the result. Do no	arch 1 through Au ot include any inco	gust 31. If the amo me amount more t	unt of your monthly incom han once. For example, if	ne varied during the
			Colu Debt	mn A cor 1	Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	and commissions (be	efore all \$	1,992.83	\$	
	y and maintenance payments. Do not include a B is filled in.	payments from a spor	use if \$	0.00	\$	
of you of from an roomma	ounts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household, ates. Include regular contributions from a spous- include payments you listed on line 3	Include regular contri your dependents, pare	butions ents, and	0.00	\$	
5. Net inc	ome from operating a business, profession, o					
	eceipts (before all deductions)	\$ 0.00 -\$ 0.00				
	y and necessary operating expenses nthly income from a business, profession, or far	·	y here -> \$	0.00	\$	
	ome from rental and other real property		· _			
		Debtor 1				
Gross re	eceipts (before all deductions)	\$ 0.00				
	y and necessary operating expenses	-\$ 0.00			•	
Net mor	nthly income from rental or other real property	\$ <u>0.00</u> Cop	. -	0.00	\$	
7. Interest	t, dividends, and royalties		\$	0.00	Ψ	

Case 16-24779 Doc 1 Filed 08/02/16 Entered 08/02/16 11:03:50 Desc Main Document Page 57 of 64 Smith, Katie Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00

Total amounts from separate pages, if any. 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,992.83 \$ 1,992.83 each column. Then add the total for Column A to the total for Column B. Total current monthly **Determine Whether the Means Test Applies to You**

Part 2:

12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,992.83

Multiply by 12 (the number of months in a year)

12b. The result is your annual income for this part of the form

x 12 23.913.96

13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live.

IL

Fill in the number of people in your household.

Fill in the median family income for your state and size of household.

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office.

49.741.00

14. How do the lines compare?

14a Line 12b is less than or equal to line 13. On the top of page 1, check box There is no presumption of abuse.

14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2.

Part 3:

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Katie Smith

Katie Smith

Signature of Debtor 1

Date August 2, 2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Smith, Katie Debtor 1 Case number (if known) Column A Column B **Debtor 1 Debtor 2 or** non-filing spouse Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 1,780.00 1,780.00 each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 1,780.00 Multiply by 12 (the number of months in a year) x 12 21,360.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. 49,741.00 Fill in the median family income for your state and size of household. **13**. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clets office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 27he presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Katie Smith

Official Form 122A-1

Date

Signature of Debtor 1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM / DD / YYYY

Certificate Number: 17572-ILN-CC-027793729



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>July 22, 2016</u>, at <u>5:23</u> o'clock <u>PM PDT</u>, <u>Katie Smith</u> received from <u>Dollar Learning Foundation</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Northern District of Illinois</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 22, 2016 By: /s/Selin Polat

Name: Selin Polat

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-24779 Doc 1 Filed 08/02/16 Entered 08/02/16 11:03:50 Desc Main Document Page 64 of 64

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Eastern Division

In	re	Smith, Katie					Case No.		
					D	ebtor(s)	Chapter	7	
		Di	(SC)	LOSURE OF COM	1PENSATIC	N OF ATTOI	RNEY FOR I	DEBTOR	
1.	cor	mpensation paid to	o me	329(a) and Fed. Bankr. P. 2 within one year before the the debtor(s) in contemplati	filing of the peti	tion in bankruptcy,	or agreed to be pai	id to me, for services rende	ered or to
		For legal servic	es, I	have agreed to accept			\$	1,500.00	
		Prior to the filin	ng of	this statement I have receive				1,500.00	
								0.00	
2.	Th	e source of the co	mper	nsation paid to me was:					
		Debtor		Other (specify):					
3.	Th	e source of compo	ensati	ion to be paid to me is:					
		Debtor		Other (specify):					
4.	-	I have not agreed firm.	d to s	share the above-disclosed co	compensation with	h any other person u	inless they are men	mbers and associates of my	y law
				e the above-disclosed comp nt, together with a list of the					firm. A
5.	In	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	a.	[Other provisions	s as n	needed]					
6.	Ву	agreement with t	he de	ebtor(s), the above-disclose	ed fee does not in	clude the following	service:		
					CERTIFIC	CATION			
this		ertify that the fore akruptcy proceeding		g is a complete statement o	of any agreement	or arrangement for	payment to me for	representation of the debt	or(s) in
-		gust 2, 2016				/s/ Erich Monzon			
	Date	e				rich Monzon			
					Sig Th	gnature of Attorney ne Law Offices of	f Erich G. Monze	on	
					No (8	66 Central Ave St orthfield, IL 6009 47) 386-6185 Fa nonzon@gmail.c	3-3031 x: (847) 386-620)3	
						ame of law firm	OIII		